

14. Position Summary

This position within the Office of the Commissioner of Insurance serves as director of the Injured Patients and Families Compensation Fund (Fund), and provides oversight for the Wisconsin Health Care Liability Insurance Plan. This is a job involving a variety of complex functions and responsibilities, including the development of procedures, systems, manuals, and rules to implement the laws governing the Fund and the decisions of the Fund Board of Governors (Board), and directs the day-to-day activities related to the administration of the Fund, and oversees the preparation of financial reporting, and management of the Fund's assets.

15. Goals and Worker Activities

- 25% A. Administration and coordination of the claims-related activities of the Fund.
- A1. Provide direction and counsel to the claims contractor as necessary, particularly in those areas involving Board policy, application of Ch. 655, Wis. Stat., and related statutes.
 - A2. Authorize the hiring of outside counsel on each claim and maintain records to ensure proper distribution of claims. Annually prepare memo to request approval by the Governor's office of outside counsel.
 - A3. Monitor correspondence with claims contractor, companies and attorneys as necessary to limit Fund liability and assure appropriate victim compensation.
 - A4. Review initial and updated claim reserves as established by contractor.
 - A5. Direct the development and monitoring of contracts for claims handling, risk management, and legal services on behalf of the Commissioner of Insurance and the Board.
 - A6. Oversee the processing of loss and loss expense payments.
 - A7. Oversee the establishing of policies regarding depth and scope of automated claims recordkeeping.
 - A8. Direct the development of procedures and guidelines to ensure consistent and coordinated claims handling between the contractor and the Fund and to provide back-up handling in case of emergencies.
 - A9. Advise Commissioner on Fund positions and policies regarding claims activities, including trends, statistics, and settlement processes.
 - A10. Make decisions regarding data elements to be captured in claims reports.
 - A11. Oversee the provision of day-to-day directions to claims contractor.

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- A12. Oversee staff support to the Claims Committee.
 - A13. Oversee the risk management functions for WHCLIP and the Fund.
 - A14. Monitor opinions released by the Supreme Court and Appellate Courts. Direct the preparation of analysis of impact to the Fund and the medical malpractice environment, as needed.
- 15% B. Development of policy recommendations, administrative rules and needed statute draft language.
- B1. Work with in-house counsel on the drafting and development of rules related to Ins 17.
 - B2. Attend public hearing on pending administrative rule legislation.
 - B3. Monitor proposed legislative bills pertaining to the Fund and assist in house counsel in the preparation of analyses of such proposed legislation for the Commissioner and the Board of Governors.
 - B4. Assist outside counsel in the preparation of policy papers exploring benefits and disadvantages of changes proposed in the state malpractice system.
 - B5. In coordination with in house counsel, recommend modifications to statutes and rules to provide for better functioning of the state malpractice system.
 - B6. Consider and make recommendations concerning statistical and topical reporting on malpractice claims activity and settlement both within the Fund, WHCLIP, and statewide.
 - B7. Develop and maintain familiarity with status of other states' malpractice systems.
 - B8. Direct the review of compiled data and analyze issues related to restructuring the current tort system for medical malpractice to advise Commissioner.
 - B9. In conjunction with in house counsel respond to legislative inquiries regarding the Fund, WHCLIP, and tort reform issues.
 - B10. In coordination with in house counsel hire and monitor the work of outside counsel in addressing issues pertaining to medical malpractice issues affecting the Fund. Review and approve legal bills for payment for outside counsel hired other than normal defense work.
- 15% C. Serve as liaison for the Commissioner of Insurance, the Board, and various committees of the Board on matters concerning the Fund, WHCLIP and medical malpractice issues.
- C1. Represent one or more of the above before or with state agencies, legislative committees, and individual legislators.

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- C2. Serve as liaison with other state agencies--Department of Safety and Professional Services, Department of Health Services, and the Administrator of Courts--involved in the operations of the Fund and the state's medical malpractice activities.
- C3. Meet with professional associations, health care providers, and representatives of other insurers.
- C4. Meet with actuarial or other consultants as necessary.
- C5. Maintain coordination and communication with the administrators of WHCLIP.
- C6. Prepare and give presentations, as necessary, to various organizations pertaining to the Fund and the medical malpractice environment, including the impact of court decisions and legislative changes.
- C7. Review and approve retroactive requests for ratification by the Legal Committee and Board in accordance with established procedures.

- 15% D. Administration of the Fund, including financial records.
- D1. Administer and coordinate the annual billing and fee collection responsibilities of the Fund with regard to more than 15,000 health care providers and facilities.
 - D2. Direct the development of contracts for actuarial services on behalf of the Commissioner of Insurance and the Board. Direct the work of the outside actuaries in the preparation of studies for the board and for studies related to legislative proposals.
 - D3. Direct the preparation of annual reports to the legislature, quarterly reports to the Board, and such other special reports as are required.
 - D4. Oversee the monthly review and annual reconciliation of the financial transactions of the Fund.
 - D5. Oversee the development and implementation of the billing structure for new entities added to the Fund.
 - D6. Oversee the development of the biennial budget for the Fund, and monitor budget and budgetary issues throughout the budget period.
 - D7. Oversee the completion of data as requested by state auditors, and implement changes as necessary.
 - D8. Oversee the completion of monthly cash flow analysis and authorize the transfer of funds, as deemed appropriate.
 - D9. Oversee the establishment, updating and reporting of future medical accounts.
 - D10. On quarterly basis, monitor Fund system access and make changes as necessary to ensure that access/security is accurate.
 - D11. Approve vouchers; schedule all P1 vouchers for payment.

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- 10% E. Administration of staff support to the Fund and WHCLIP Board.
- E1. Oversee staff support at committee meetings as staff represents the Commissioner.
 - E2. Oversee the preparation and distribution of agenda and supporting materials for quarterly Board meetings.
 - E3. Implement or monitor implementation of Board resolutions and directives, as required.
 - E4. Advise Commissioner as appropriate on positions to be taken on all aspects of Fund and WHCLIP administration.
 - E5. Monitor legal actions taken on behalf of the Board.
 - E6. Oversee reports to the Board and advise the Board of major issues facing the Fund, WHCLIP, and the medical malpractice insurance climate in Wisconsin.
 - E7. Provide technical and administrative support to the Committees of the Board to assist the committees in various projects including, but not limited to: Hiring and monitoring of outside investment managers, development of fund participation guidelines, development and implementation of risk management programs to further the goals of patient safety.
 - E8. Quarterly prepare for the Board reports on Fund activities, including Market Share report and report of Outside Counsel hires.
 - E9. Annually review term expiration for Board Public members and inform members of term expiration dates. Provide documentation and orientation to new Board members.
- 5% F. Oversee the operations of the Wisconsin Health Care Liability Insurance Plan (WHCLIP)
- F1. Review all financial filings and other documents for the Commissioner's signature.
 - F2. Advise Commissioner on WHCLIP coverage and rates for providers requesting coverage under the WHCLIP.
 - F3. Work with the WHCLIP manager in the distribution of excess surplus and federal income tax issues.
 - F4. Oversee and provide assistance to the WHCLIP manager in the implementation of board directives.
 - F5. Oversee and provide assistance to the WHCLIP manager in the development of underwriting policies and procedures to address concerns in the medical malpractice primary coverage market.
- 5% G. Administration of the Peer Review Surcharge program.

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- G1. Oversee the development of administrative rules for physician surcharge.
 - G2. Act as liaison to the Wisconsin Medical Society in setting up professional peer groups for reviewing claims paid for physician malpractice.
 - G3. Oversee the definition of the data elements and data systems needed to implement surcharge activities and to make reports to the Peer Review Council and Board.
 - G4. Oversee the development and implementation of reports and their distribution.
- 10% H. Supervision of Fund staff and provide direction and assistance in the implementation of the agency's affirmative action program.
- H1. Plan and organize work of staff inclusive of long-range automation and work plans.
 - H2. Review and modify staff operating procedures, as necessary.
 - H3. Evaluate staff performances and recommend improvements.
 - H4. Hire, promote, train, and discipline staff.
 - H5. Establish and maintain an effective working relationship with fellow employees and the general public.
 - H6. Provide access and coordination of staff training programs.
 - H7. Assist in implementation of specific short-term and long-term affirmative action goals.
 - H8. Initiate efforts to attract and employ affirmative action target group employees in permanent, part-time, and limited-term employment.
 - H9. Initiate efforts to advance affirmative action target groups; use training, when feasible, to assist.
 - H10. Initiate and continue efforts to provide information on affirmative action policies and procedures to employees, e.g., agency goals, harassment and discrimination policies, training, and advancement opportunities.

Knowledge/Skill/Ability

Knowledge

1. Understanding of the principles of risk management
2. Understanding of insurance, particularly medical malpractice, including: financial reporting; actuarial science and rate-making; claims management; computer systems; certificates of insurance; underwriting; asset and investment management; medical expense accounting (e.g. future medical costs); self-insurance and policy deductibles; financial operations management; and malpractice litigation
3. Understanding of insurance regulatory process

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4. Understanding of insurance markets
5. Understanding of the state statutes and the legislative process as it relates to medical malpractice issues
6. Understanding of legal issues involved in medical malpractice
7. Understanding of statutory and GAAP accounting and reporting
8. Understanding of information technology and information systems applicable to medical malpractice area.

Skills

1. Manage complex public programs, including contractual arrangements with a variety of private vendors
2. Interpersonal skills in dealing with a wide variety of diverse people in the medical and legal areas-- that are working towards a common goal in the medical malpractice environment
3. Ensure the financial integrity of an enterprise public segregated fund with over \$55 million in annual budget authority, with health care provider participants who number more than 15,000, and in a program that has paid more than \$840 million in claims over an extended period
4. Use of personal computers, including common software packages and packages specific to insurance claims administration and accounting in the medical malpractice environment

Abilities

1. Ability to supervise staff with a variety of functions in financial operations, program administration and in program accountability/reporting
2. Ability to delegate responsibility to contract staff and to "in-house" legal staff
3. Ability to coordinate the work of different vendors to meet program objectives
4. Ability to work in a team structure with advisory committee and project teams
5. Ability to clearly communicate technical insurance concepts to non-technical audiences, including legal, medical, medical/health insurance, the legislature and the media
6. Ability to understand complex medical malpractice-related issues quickly, to communicate both verbally and in written communications clearly and concisely, and to work with a variety of highly visible and highly skilled individuals in the medical, legal and insurance communities to identify and reach solutions to address common goals in the medical malpractice environment.

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